

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000160994

**Entity Name:** PRIMEFACTOR, LLC

**Current Principal Place of Business:**

9858 CLINT MOORE ROAD  
C-111 #240  
BOCA RATON, FL 33496

**Current Mailing Address:**

9858 CLINT MOORE ROAD  
C-111 #240  
BOCA RATON, FL 33496

**FEI Number:** 47-5272065

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LABINER, PAUL  
5499 N FEDERAL HWY STE K  
BOCA RATON, FL 33487 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR
Name	DAVID GELLER REVOCABLE TRUST, TRUSTEE
Address	17510 CADENA DRIVE
City-State-Zip:	BOCA RATON FL 33496

Title	AMBR
Name	LYNDA GELLER REVOCABLE TRUST, TRUSTEE
Address	17510 CADENA DRIVE
City-State-Zip:	BOCA RATON FL 33496

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID GELER

MBR

01/26/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date